

The Entrant agrees to maintain the price designated below for six months after closing date of exhibition.

Telephone No. _____ Address 538 East 84th St NEW YORK 28 NY Zone No. _____

Please Enclose Registration Fee of \$1.00 (Check or Money Order) With Entry Blank

Entry blanks must be filled out and returned to the Museum on or before April 3, those postmarked later than April 3 will not be accepted.
Entries must be delivered at the Museum between 9 A.M. and 5 P.M. from April 7 to April 14 (except Sunday).

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